

# KentuckyHistoricalSociety

Kentucky Oral History Commission  
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## Kentucky Oral History Commission Technical Assistance Grant Application FY09-02

Project Title	
Sponsoring Individual/ Organization	
Address:	
City/State/Zip:	
Telephone:	
Email:	

Project Director:	
Address:	
City/State/Zip:	
Telephone:	
Email:	

### Signatures:

Project Director:	Date:
Organization Official (if applicable):	Title:

## **Project Description**

Please describe the purpose of the proposed oral history project including the specific geographic and subject areas to be covered. Also address the historical significance of the subject and identify any anticipated use of the interviews in a public presentation. Attach additional sheets if more space is required.

Letters of support are encouraged. You may attach a maximum of five.

For technical assistance or grant related questions, applicants are encouraged to contact the program coordinator at the Kentucky Oral History Commission: Sarah Milligan at [sarah.milligan@ky.gov](mailto:sarah.milligan@ky.gov) or 502-564-1792 ext 4434